

Docket # _____

City of Columbus Board of Zoning Appeals Conditional Use Application

Has this use been initiated on this property? ____ Yes ____ No

Has the Department of Technical Code Enforcement issued a stop work order for this project ? ____ Yes ____ No

If you do not want this application to be decided through the simplified hearing officer procedure, check here: _____

Applicants:

Name(s)

Number Street City State ZIP

Telephone No. _____ FAX No. _____ E-mail _____

Owners (not contract buyers) as shown on the county tax records:

Name(s)

Number Street City State ZIP

Telephone No. _____ FAX No. _____ E-mail _____

Property Location

Address:

Number Street City Zip Code

Subdivision _____ Lot Number _____ Lot Dimensions _____

Lot Size (sq. ft. or acres) _____ Zoning Classification _____

Current use of Premises _____ Conditional use requested: _____

Zoning ordinance section permitting this use: Section 17. _____

Describe this use in detail (type of use, nature of use, size, hours of operation, number of employees, customers, etc.)

I understand that the zoning ordinance does not permit the above use on this property unless the Board of Zoning Appeals approves it as a conditional use and that the request must satisfy all the criteria contained in Section 17.61.060 of the Columbus City Code. I submit the following justification for granting this conditional use:

1.Safe vehicular and pedestrian access to this property and proper access for emergency vehicles will be provided as follows:

2.Adequate off street parking will be provided as follows:

3.Refuse and service areas will be provided for this use as follows:

4.All utilities necessary for this use are available as follows:

5.Screening and buffering will be provided as follows:

6. All proposed signs and exterior lighting must be described, together with an explanation of any glare, effect on traffic safety, and the compatibility of signs and lighting with other properties in this zoning district:

7. The proposed use will comply with minimum setback distances, yards, and other open space requirements as follows:

8. This use will be in harmony with the neighborhood, will not cause undue noise, traffic, odors, safety, or environmental hazards, and will not have an adverse effect on neighboring property because:

I swear or affirm under penalties for perjury, that the foregoing representations are true to the best of my knowledge and belief

Applicant's Signature

Date _____

I authorize this application and authorize the plan commission, its staff, and such other persons as the staff may deem appropriate to enter upon the property involved in this request for the purpose of analyzing this request.

Owner's Signature

Date _____

Owner's Signature

Date _____